## **Retail Food Inspection Report**

Floyd County Health Department Telephone (812) 948-4726

Establishment Name COFFEE CROSSING LLC  Address 4212 CHARLESTOWN ROAD, NEW ALBANY IN 47150						Telephone Number 812-981-2633 502-214-0196	Date of Inspection 10/26/2020	ID#	
Owner ALAN BUTTS						Purpose X Routine	Follow Up	<b>Released</b> 11/05/2020	
Owner's Address 208 ROSEWOOD DRIVE CLARKSVILLE, IN 47129						Follow-up Complaint			
Person in Charge OLIVIA BLISS						Pre-Operational			
Responsible Person's Email DANIELC@COFFEECROSSING.COM						Temporary HACCP	Menu Type  1 2 _X 3	4 5	
Certified Food Handler DANIEL CUNNINGHAM						Other (list)			
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"									
Section # C	ection # C NC R Narrative To Be Corrected								
234 297 310 431	X X X X		Observed BOH of Observed dust of	ce scoop inappropriately coolers with wire racks r n lobby HVAC over coff d ceiling tile over BOH s	eeding	g wiped clean.	CORREGI WEEK 2 WEEK 2 WEEK	S	
Summary of Violations C 0 NC 4 R 0									
Received by (name and title printed): OLIVIA BLISS						Inspected by (name and title printed):  A.J. Ingram CHIEF FOOD SPECIALIST			
Received by (signature):						Inspected by (signature):			
cc:				cc:			cc:		